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CONFIRMATION NO. 6812

Bib Data Sheet

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|-----------------------------|--|--------------|------------------------|--|
| SERIAL NUMBER<br>10/716,842 | FILING OR 371(c)<br>DATE<br>11/18/2003<br>RULE | CLASS<br>700 | GROUP ART UNIT<br>2121 | ATTORNEY<br>DOCKET NO.<br>2102402-914971 |
|-----------------------------|--|--------------|------------------------|--|

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**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/427,445 11/18/2002 and claims benefit of 60/427,527 11/18/2002 *(S)*

**\*\* FOREIGN APPLICATIONS *(S)* \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED****\*\* 03/30/2004**

|  |                        |                      |                    |                         |
|--|------------------------|----------------------|--------------------|-------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no   | STATE OR COUNTRY<br>CA | SHEETS DRAWING<br>40 | TOTAL CLAIMS<br>39 | INDEPENDENT CLAIMS<br>6 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | Examiner's Signature   | Initials             |                    |                         |

**ADDRESS**

26379

**TITLE**

Multi-level controller system

|                             |   |   |
|-----------------------------|---|---|
| FILING FEE RECEIVED<br>1506 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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